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PTO/SB/82 (01-06)
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	Application Number	10/605,548			
POWER OF	Filing Date	Oct 07, 2003			
WITH	First Named Inventor	Brown, Stephen			
ATTORNEY	Art Unit	3626			
UDENCE ADDDESS	Examiner Name	THOMAS, JOSEPH			
NDENCE ADDRESS	Attorney Docket Number	6858P001X14 / 014030.0110N8US			

I hereby revoke all previous powers of attorney given in the above-identified application.								
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I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature	180	m_						
Name	Name Stephen J. Brown, President & CEO, Health Hero Network, Inc.							
Date	4-	X -06 Telephone 650-779-9101 / 650-779-9105						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total	of1	forms are submitted.						

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/96 (12-05)
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STATEMENT UNDER 37 CFR 3.73(b)					
Applicant/Patent Owner: Stephen J. Brown					
Application No./Patent No./Control No.: 10/605,548	Filed/Issue Date: Oct 07, 2003				
Entitled: NETWORKED HEALTH INFORMATION SYSTEM FO	OR MONITORING FOOD INTAKE				
Health Hero Network, Inc.	, a Corporation				
(Name of Assignee)	(Type of Assignee: corporation, partnership, university, government agency, etc.)				
states that it is:  1.  the assignee of the entire right, title, and interest; o	or				
<ol> <li>an assignee of less than the entire right, title and ir (The extent (by percentage) of its ownership intere</li> </ol>					
in the patent application/patent identified above by virtue	of either:				
in the United States Patent and Trademark Office a original assignment is attached.	pplication/patent identified above. The assignment was recorded at Reel 014031 , Frame 0388 , or a true copy of the				
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Additional documents in the chain of title are list	ted on a supplemental sheet.				
assignee was, or concurrently is being, submitted for INOTE: A separate copy (i.e., a true copy of the original copy)	evidence of the chain of title from the original owner to the or recordation pursuant to 37 CFR 3.11. inal assignment document(s)) must be submitted to Assignment ecord the assignment in the records of the USPTO. See MPEP				
The undersigned (whose title is supplied below) is author	rized to act on behalf of the assignee.				
Signature	Date				
Stephen J. Brown	650-779-9101 / 650-779-9105				
Printed or Typed Name Telephone N					
President & CEO, Health Hero Netwo	ork, Inc.				
Title					

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